

# **PART B - FEE(S) TRANSMITTAL**

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22428 7590 02/11/2004

**FOLEY AND LARDNER  
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(Depositor's name)
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/840,014	04/19/2001	Crystal C. Watkins	55802 (71609)	3068

TITLE OF INVENTION: METHODS FOR PREVENTION AND TREATMENT OF GASTROINTESTINAL DISORDERS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	\$665 1330	\$300	\$965 1630	05/11/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
RUSSEL, JEFFREY E	1654	514-003000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **FOLEY & LARDNER LLP**  
2  
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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**JOHNS HOPKINS UNIVERSITY**

**Baltimore, Maryland**

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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(Authorized Signature) Suet M. Chong (Date) 5/11/04  
Suet M. Chong Reg. #38,104

05/12/2004 WABRHAM2 00000185 09840014

01 FC:1501  
02 FC:1504

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